

Exhibit S



Complete this form to start arbitration under an arbitration agreement in a contract.

1. Which party is sending in the filing documents? (check one) Consumer Business

2. Briefly explain the dispute:

Claimant [REDACTED] has subscribed to CenturyLink's internet and home phone services. Despite being quoted \$89.95 per month, Claimant was in fact charged \$253.08 per month for 30 months. As a result of these charges, CenturyLink placed negative entries on Claimant's credit report. Claimant contacted CenturyLink customer service regarding these excessive charges at least 9 times, but CenturyLink never refunded the amounts owed to Claimant.

At the time Claimant contracted with CenturyLink, Claimant did not know and could not have known that CenturyLink would overbill Claimant and impose excessive and unauthorized monthly charges. Claimant suffered monetary losses as a direct result of CenturyLink's misconduct, and accordingly brings claims for common-law fraud, unjust enrichment, and for violations of Colo. Rev. Stat. § 6-1-105 et seq. and Ariz. Rev. Stat. § 44-1522 et seq.

3. Specify the amount of money in dispute, if any: \$48,939.00

4. State any other relief you are seeking:

Attorney Fees Interest Arbitration Costs Other; explain: punitive damages and injunctive relief

5. Identify the requested city and state for the hearing if an in-person hearing is held:

City: [REDACTED]

State: [REDACTED]

6. Please provide contact information for both the Consumer and the Business. Attach additional sheets or forms as needed.

Consumer:

Name: [REDACTED]

Address: [REDACTED]

City: [REDACTED]

State: [REDACTED]

Zip Code: [REDACTED]

Telephone: [REDACTED]

Fax:

Email Address: [REDACTED]

CenturyLink Account Number: [REDACTED]

Consumer's Representative (if known):

Name: Ashley C. Keller

Firm: Keller Lenkner LLC

Address: 150 N. Riverside Plaza, Suite 4270

City: Chicago

State: Illinois

Zip Code: 60606

Telephone: 312.741.5222

Fax:

Email Address: ack@kellerlenkner.com

Business:

Name: CenturyLink, Inc.

Address: 931 14th St., 9th Floor



City: Denver	State: Colorado	Zip Code: 80202
Telephone:	Fax:	
Email Address:		
Business' Representative (if known):		
Name: Michael T. Williams		
Firm: Wheeler Trigg O'Donnell LLP		
Address: 370 17th St., Suite 4500		
City: Denver	State: Colorado	Zip Code: 80202
Telephone: 303.244.1867	Fax: 303.244.1879	
Email Address: williams@wtotrial.com		
Date: November 21, 2019		

7. Send a copy of this completed form to the AAA together with:

- A clear, legible copy of the contract containing the parties' agreement to arbitrate disputes;
- The proper filing fee (filing fee information can be found in the Costs of Arbitration section of the Consumer Arbitration Rules); and
- A copy of the court order, if arbitration is court-ordered.

8. Send a copy of the completed form and any attachments to all parties and retain a copy of the form for your records.

To file by mail, send the initial filing documents and the filing fee to: AAA Case Filing Services, 1101 Laurel Oak Road, Suite 100, Voorhees, NJ 08043.

To file online, visit www.adr.org and click on **File or Access Your Case** and follow directions. To avoid the creation of duplicate filings, the AAA requests that the filing documents and payment be submitted together. When filing electronically, no hard copies are required.

Pursuant to Section 1284.3 of the California Code of Civil Procedure, consumers with a gross monthly income of less than 300% of the federal poverty guidelines are entitled to a waiver of arbitration fees and costs, exclusive of arbitrator fees. This law applies to all consumer agreements subject to the California Arbitration Act, and to all consumer arbitrations conducted in California. If you believe that you meet these requirements, you must submit a completed Affidavit for Waiver of Fees, available on our website.